

County: Eau Claire  
FALL CREEK VALLEY CARE CENTER  
344 LINCOLN AVENUE

Facility ID: 3320

Page 1

FALL CREEK 54742 Phone: (715) 877-2411 Ownership: Limited Liability Company  
Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled  
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No  
Number of Beds Set Up and Staffed (12/31/03): 60 Title 18 (Medicare) Certified? Yes  
Total Licensed Bed Capacity (12/31/03): 60 Title 19 (Medicaid) Certified? Yes  
Number of Residents on 12/31/03: 55 Average Daily Census: 57

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		18.2	
Supp. Home Care-Personal Care	No					1 - 4 Years		43.6	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.8	Under 65	5.5	More Than 4 Years		23.6	
Day Services	No	Mental Illness (Org./Psy)	54.5	65 - 74	9.1				
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	25.5			85.5	
Adult Day Care	No	Alcohol & Other Drug Abuse	1.8	85 - 94	52.7	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.6	95 & Over	7.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	3.6			Nursing Staff per 100 Residents			
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	0.0	65 & Over	94.5				
Transportation	No	Cerebrovascular	18.2			RNs		8.8	
Referral Service	No	Diabetes	1.8	Gender	%	LPNs		7.4	
Other Services	No	Respiratory	1.8			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	10.9	Male	18.2	Aides, & Orderlies			
Mentally Ill	No			Female	81.8				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	2.6	132	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Skilled Care	1	100.0	336	34	89.5	113	0	0.0	0	14	87.5	123	0	0.0	0	0	0.0	0	49	89.1
Intermediate	---	---	---	3	7.9	93	0	0.0	0	2	12.5	123	0	0.0	0	0	0.0	0	5	9.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		38	100.0		0	0.0		16	100.0		0	0.0		0	0.0		55	100.0

*****						
Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----				
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	15.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	87.3	12.7	55
Other Nursing Homes	3.1	Dressing	9.1	83.6	7.3	55
Acute Care Hospitals	80.2	Transferring	29.1	54.5	16.4	55
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	12.7	67.3	20.0	55
Rehabilitation Hospitals	0.0	Eating	52.7	41.8	5.5	55
Other Locations	1.0	*****				
Total Number of Admissions	96	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	14.5		Receiving Respiratory Care	20.0
Private Home/No Home Health	36.1	Occ/Freq. Incontinent of Bladder	65.5		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	9.3	Occ/Freq. Incontinent of Bowel	30.9		Receiving Suctioning	1.8
Other Nursing Homes	3.1				Receiving Ostomy Care	10.9
Acute Care Hospitals	30.9	Mobility			Receiving Tube Feeding	1.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.6		Receiving Mechanically Altered Diets	50.9
Rehabilitation Hospitals	20.6					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	0.0	With Pressure Sores	9.1		Have Advance Directives	90.9
Total Number of Discharges		With Rashes	10.9		Medications	
(Including Deaths)	97				Receiving Psychoactive Drugs	63.6

\*\*\*\*\*  
Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

*****									
	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	89.1	86.2	1.03	87.1	1.02	88.1	1.01	87.4	1.02
Current Residents from In-County	81.8	78.5	1.04	81.0	1.01	82.1	1.00	76.7	1.07
Admissions from In-County, Still Residing	13.5	17.5	0.77	19.8	0.69	20.1	0.67	19.6	0.69
Admissions/Average Daily Census	168.4	195.4	0.86	158.0	1.07	155.7	1.08	141.3	1.19
Discharges/Average Daily Census	170.2	193.0	0.88	157.4	1.08	155.1	1.10	142.5	1.19
Discharges To Private Residence/Average Daily Census	77.2	87.0	0.89	74.2	1.04	68.7	1.12	61.6	1.25
Residents Receiving Skilled Care	90.9	94.4	0.96	94.6	0.96	94.0	0.97	88.1	1.03
Residents Aged 65 and Older	94.5	92.3	1.02	94.7	1.00	92.0	1.03	87.8	1.08
Title 19 (Medicaid) Funded Residents	69.1	60.6	1.14	57.2	1.21	61.7	1.12	65.9	1.05
Private Pay Funded Residents	29.1	20.9	1.39	28.5	1.02	23.7	1.23	21.0	1.39
Developmentally Disabled Residents	1.8	0.8	2.26	1.3	1.43	1.1	1.64	6.5	0.28
Mentally Ill Residents	56.4	28.7	1.96	33.8	1.67	35.8	1.57	33.6	1.68
General Medical Service Residents	10.9	24.5	0.45	21.6	0.51	23.1	0.47	20.6	0.53
Impaired ADL (Mean)	46.2	49.1	0.94	48.5	0.95	49.5	0.93	49.4	0.93
Psychological Problems	63.6	54.2	1.17	57.1	1.11	58.2	1.09	57.4	1.11
Nursing Care Required (Mean)	13.2	6.8	1.94	6.7	1.96	6.9	1.91	7.3	1.80